PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/625,960			ing Date 24/2 00 3	To be Mailed
APPLICATION AS FILED – PART I OTHER TH (Column 1) (Column 2) SMALL ENTITY □ OR SMALL EN											HER THAN
FOR					MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A	ı	N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), (i)		N/A		N/A		N/A		1	N/A	
	EXAMINATION FE	E	N/A		N/A		N/A		1	N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1,16(h))	s	minus 3 = *			ı	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 ional 50 :	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	11/17/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18())	• 42	Minus	·· 42	= 0		x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	 -3	= 0		x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus	**	=	l	x \$ =		OR	x \$ =	
M	Independent (37 CFR 1,16(h))		Minus	***	-	1	x \$ =		OR	x \$ =	
Z	Application Size Fee (37 CFR 1.16(s))]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	
"If the entry in column 1 is less than the entry in column 2, write "o" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". JOY DOBBS/											

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